

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	3801
FORMALITY REVIEW	27	JCS 23	02-21-01
RESPONSE FORMALITY REVIEW	104	625	06 07 01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓ 8/02
2	✓ 1/02
3	✓ 2/03
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If more than 150 claims or 10 actions  
staple additional sheet here

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Ref  
03/21/01